NDDHS MEDICAID WAIVERS & 1915(i) SPA FOR HOME AND COMMUNITY BASED SERVICES (Rev. 11/2020)

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HOME AND COMMUNITY BASED	TECHNOLOGY DEPENDENT	CHILDREN'S HOSPICE	MEDICAID WAIVER	
SERVICES MEDICAID WAIVER	MEDICAID WAIVER	WAIVER	SELF DIRECTED SUPPORTS FOR	
(AGED AND DISABLED)	g •	G •	MEDICALLY FRAGILE CHILDREN	
Services:	Services:	Services:	Services:	
Adult Day Care	Attendant Care Service	• Respite	• In-Home Supports	
Adult Foster Care Adult Position in the second se	Components include:	 Skilled Nursing 	Institutional Respite	
Adult Residential	 Nurse Management 	 Hospice 	Transportation	
Case Management	 Attendant Care Service Provider 	 Palliative Care 	• Equipment and Supplies	
• Chore	 Case Management 	 Expressive Therapy 	Individual and Family Counseling	
Community Transition Services	 Non-medical Transportation 	Grief Counseling	Dietary Supplements	
Emergency Response System Figure 2 and 1 Madification	 Specialized Equipment and 	Case Management	Environmental Modifications	
 Environmental Modification Extended Personal Care	Supplies	Equipment & Supplies	Case Management (optional)	
 Extended Personal Care Family Personal Care 				
 Failing Fersonal Care Home Delivered Meals				
Homemaker				
Non-Medical Transportation				
Respite				
 Specialized Equipment/Supplies 				
 Supervision 				
Supported Employment				
Transitional Care				
Functional Eligibility	Functional Eligibility	Functional Eligibility	Functional Eligibility	
•	 Screened in need of nursing facility level 	 Screened in need of nursing 	Screened in need of nursing facility level	
 Screened in need of nursing facility level of care 	of care	facility level of care	of care	
(LOC Screening NDAC 75-02-09)	(LOC Screening NDAC 75-02-02-09)	(LOC Screening NDAC 75-02-02-09)	(LOC Screening NDAC 75-02-02-09)	
• Age 18 and older and physically	 Age 18 and over and physically disabled 	• Birth to 22 nd birthday	• 3 to 18 years of age	
disabled as determined by SSA, SRT,	as determined by SSA or be at least 65	 Life limiting diagnosis of possibly 	• Greatest need as determined through a	
or be at lease 65 years of age	years of age	one year of life expectancy	Level of Need ranking process	
Agree with care plan	Medically Stable	 Not eligible or receiving services 	Not eligible or receiving services	
Service/care delivered in the	Competent to make decisions	through another waiver	through another waiver	
recipient's private family dwelling or	 Vent dependent at least 20 hrs. per day 	 Needs at least one waiver service 	Requires support for Health & Safety	
recipient is receiving a community-	 Agree with care plan 	quarterly	Needs at least one waiver service	
based service				
	 Has informal caregiver system for a contingency plan 	Child lives with a primary caragiver	quarterly	
Not aligible or recogning commons	r commigency dian	caregiver	Child lives with a primary caregiver	
Not eligible or receiving services through another waiver.		A anna anida Casa Dian		
through another waiver	Not eligible or receiving services through	Agree with Case Plan	capable of self directing services	
	• Not eligible or receiving services through another waiver	Agree with Case Plan	capable of self directing services • Agree with Case Plan	
through another waiver • Receive services on a monthly basis	Not eligible or receiving services through	Agree with Case Plan		
through another waiver • Receive services on a monthly basis Financial Eligibility	• Not eligible or receiving services through another waiver	Agree with Case Plan		
through another waiver • Receive services on a monthly basis Financial Eligibility Must be Medicaid Eligible	• Not eligible or receiving services through another waiver	Agree with Case Plan	Agree with Case Plan	
through another waiver • Receive services on a monthly basis Financial Eligibility Must be Medicaid Eligible Program Cap	 Not eligible or receiving services through another waiver Receive services on a monthly basis 		Agree with Case Plan Program Cap	
through another waiver • Receive services on a monthly basis Financial Eligibility Must be Medicaid Eligible Program Cap	• Not eligible or receiving services through another waiver		Agree with Case Plan	

MEDICAID WAIVERS and 1915(i) SPA FOR HOME AND COMMUNITY BASED SERVICES (2019)

North Dakota Department of Human Services

AUTISM WAIVER	MEDICAID WAIVER ID/DD		
Services:	Services: • Adult Foster Care • Behavioral Consultation • Community Transition Services • Day Habilitation • Equipment & Supplies • Environmental Modifications • Extended Home Health Care • Family Care Option • Homemaker	 Independent Habilitation Individual Employment Support Infant Development In-Home Supports Parenting Support Prevocational Services Residential Habilitation Small Group Employment Support 	
 Functional Eligibility Meets ICF/MR Level of Care Not eligible or receiving services through another waiver Requires supports for Health & Safety Has a diagnosis of Autism Spectrum disorder from a professional able to diagnosis from the DSM. Person lives with a primary caregiver who is capable of self-directing services 	 Functional Eligibility Eligible for Medicaid (meets Medicaid income and other eligibility requirements). If an individual is not eligible for Medicaid, they are responsible to private pay for services. Meet the eligibility criteria for Developmental Disability Program Management (DDPM) per North Dakota Administrative Code 75-04-06 Meet the Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) level of care Be in need of at least one IID/DD HCBS Waiver service Not eligible or receiving services through another waiver 		
Financial Eligibility Medicaid Eligible			
Program Caps Age limitation of birth through 11. Limited to 96 individuals per year Assistive Tech -5000 per life of waiver Level of support determines: Respite up to 40 hours per month. Service Management – up to 16 hours per month	 Frogram Caps Environmental Mod. – not to exceed \$20,000.00 for the duration of the waiver period. Equip. and Supplies – not to exceed \$4,000 per waiver year. In-Home Supports – not to exceed 300 hours per month per participant Parenting Support – limited to an average of 4 hours of individualized child-focused direct training per week during a quarter. Hours in Day Habilitation, Individual Employment Support, Small Group Employment, and Prevocational Services may not exceed 40 cumulative hours per week per individual. Community Transition Services-must reside in ND Medicaid Institution for minimum of 60 consecutive days; must be moving to a setting with 6 or fewer people and directly responsible for living expenses; includes essential household furnishings and moving expenses, set up see or deposed for utility or services access; one time set up expenses are limited to \$3000 per eligible individual per waiver period. 		

1915(i) HCBS Behavioral Health – (Not Approved as of 11/12/2020 Children & Adults

Services:

- Care Coordination Age 0+
- Training and Supports for Unpaid Caregivers Age 0+
- Peer Support Age Age 18+
- Family Peer Support Age 0 to 18
- Respite Age 0 to 21
- Non-Medical Transportation Age 0+
- Community Transition Services Age 0+
- Benefits Planning Services Age 0+
- Supported Education Age 5+
- Pre-Vocational Training Age 17 ½+
- Supported Employment Age 14+
- Housing Supports Age 17 ½+

Target Population

• The individual has one or more of the qualifying diagnoses listed in the application.

Functional Eligibility

• Have a functional impairment, which substantially interferes with or substantially limits the ability to function in the family, school or community setting, as evidenced by a complex score of 50 or higher on the WHODAS 2.0.

Financial Eligibility

A recipient of ND Medicaid or Medicaid Expansion with a Federal Poverty level of 150% or below.

Program Caps

Maximum # Individuals Served:

No limit on individuals served - Projected Eligible - 11,150 1st Year

Service Limits

• Care Coordination

8 hours per day

• Training and Supports for Unpaid Caregivers

Daily – 8 hours

Annual - 208 hours

Annual Training Budget - \$500

• Peer Support

Daily – 8 hours

Annual – 260 hours

• Family Peer Support

Daily – 8 hours

Annual – 260 hours

• Respite

Month – 40 hours

Annual - 480

• Non-Medical Transportation

No limits

• Community Transition Services

Lifetime - \$3,000

• Benefits Planning Services

Daily – 8 hours

Fiscal Year – 20 hours

• Supported Education

Daily – 8 hours

Annual – 156 hours

• Pre-Vocational Training

Daily – 8 hours

Annual – 156 hours

• Supported Employment

Daily – 8 hours

Annual – 156 Hours

• Housing Supports (Includes Community Transition Coordination)

Daily – 8 hours

- o Pre-Tenancy: Annual 156 hours (78 hrs. per 3 mo.)
- o Tenancy: Annual 156 hours (78 hrs. per 6 mos.)